



APPLICATION FOR EXTENSION OF SPECIAL USE PERMIT / VARIANCE

Will County Land Use Department
58 E. Clinton St., Suite 500 • Joliet, Illinois 60432
Telephone (815) 727-8850 • Facsimile (815) 727-8638
Internet Site - <http://www.willcountylanduse.com>

Lawrence M. Walsh
County Executive

SUP / VAR EXT # _____

PART A – APPLICANT INFORMATION

Property owner name(s): _____
Address(es): _____
Telephone number(s): _____
Fax number(s): _____
E-mail(s): _____
Agent/attorney name *(specify attorney's relationship to owner/agent)*: _____
Agent/attorney firm name: _____
Agent/attorney address: _____
Agent/attorney telephone number: _____
Agent/attorney fax number: _____
Agent/attorney E-mail: _____

PART B – SUBJECT PROPERTY INFORMATION

Address: _____
General location: _____
Township: _____
PIN (permanent index number): _____
Current zoning: _____
Current land use: _____
Existing/proposed sanitary system (check box): septic field mechanical central sewer
Existing/proposed water supply (check box): public water well

PART C – APPROVED ZONING CASE INFORMATION

Zoning Case #: _____
Date Zoning Case Approved by Planning & Zoning Commission (most variances) or County Board (special use permits and some variances): _____
Purpose of request(s): _____

PART D: SIGNATURES AND NOTARIZATION

I, (We) certify that all statements contained in this application and any attachments, documents, or plans submitted herewith are true to the best of my (our) knowledge and belief.

I, (We) consent to the entry in or upon the premises described in this application by any authorized official of the County of Will for the purposes of completing any reviews deemed necessary by the submittal of this application.

I, (We) have read and understand all applicable sections of the Will County Zoning Ordinance.

Owner and/or agent/attorney printed names, and signatures:

	<u>Name</u>	<u>Signature</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

State of Illinois)
) SS
 County of Will)

I, _____, a Notary Public in and for the County and State aforesaid, do hereby certify that _____, personally known to me is (are) the person(s) who executed the foregoing instrument bearing on the date of _____, 20__, and appeared before me this day in person and acknowledged that he/she (they) signed sealed, and delivered the same instrument for the uses and purposes therein set forth.

(Seal)

Signature of Notary